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COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature x <i>R. Milliken</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: <i>08CR155</i></p>		<p>B. Received by (Printed Name) <i>R. Milliken</i></p>	<p>C. Date of Delivery <i>3/10/08</i></p>
<p>2. Article Number (Transfer from service label)</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"><i>08CR155</i></p>	
<p>Mr. Keith Throckmorton, Clerk United States District Court 800 Estes Kefauver Federal Building and United States Courthouse 801 Broadway Nashville, TN 37203-3816</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p>	
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>			
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	

UNITED STATES POSTAL SERVICE

NASHVILLE, TN 372

MAR 14 2008

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First-Class Mail
USPS
Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box •

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURTMICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT
219 S. DEARBORN STREET
CHICAGO, ILLINOIS 606MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

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